



THE CALIFORNIA HOMŒOPATH.

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ORIGINAL ARTICLES.

MERCURIUS CYANATUS IN DIPHTHERIA.

By S. L.

The old school is perfectly welcome to verify the drugs which emanated from our own school, especially as they are also falling in our traces to give one remedy at a time in minute doses. In fact one might nearly believe that the old school takes everything from us without acknowledging receipt, in fact some of them become even more Homœopathic than some who belong to our school, pride themselves to be Homœopathic physicians, but fail too often to be Homœopathic prescribers. As long as this dominant and domineering school fails to adopt our shibolleth, the *similia similibus curantur* as the guiding star in their therapeutics, empiricism will remain for them the only guide, and what an unsafe guide this only remains experience has shown for centuries. But to my point. In the Allgemeine Med. Central Zeitung, 20, 1888, Dr. Sellden gives his experience with the Mercur. cyan and gives his own statistics in the treatment of Diphtheria with or without that drug. From 1879 to 1882 he treated 564 patients and lost 523 or nearly all at that time. Prof. Schultz recommended the cyanide of mercury very highly, and during the four years

from 1883 to 1886 he followed strictly that advice, treated 160 persons and lost only 29. It cannot be said that the symptoms in the first four years were more severe than in the later years; it cannot be considered merely accidental, for he met the same pseudo membranes, glandular affections, foul breath, etc., and where as formerly he relied on Kal. chlor., Pilocarpinum, balsamica, etc., he relies now exclusively on one drug and fares well with it. Other well known Swedish physicians relied upon the cyanide of mercury in more than 1,400 cases and lost only 69, a percentage of 4.9.

Still there were a few cases where its action was not prompt enough, and he gave it then in alternation with the iodides of mercury. He thinks that with small and frequently repeated doses the body becomes so saturated with Hg. that the bacteriæ of Diphtheria do not find a suitable soil for their growth, their reproduction is limited, the constitution of the patient gains time to recuperate, and the vis medicatrix naturæ gains the victory.

His prescriptions are: R. Cyanide of Mercury, two Centigrammes (one third of a grain); Tinct. of Aconit., 2 grmm.; mel. crud., 50 grmm.; aqua destill., 150.0 grmm; MDS, a teaspoonful every $\frac{1}{4}$, $\frac{1}{2}$ or whole hour, according to the age of the patient. He is opposed to all swabbing and penciling, and gives as a gargle, R. Mercur cyan., 4 ctgrmm. to 400 gramm., Aqua menth piper. MDS, gargle every $\frac{1}{4}$ hour.

This is about one-third of a grain to more than six ounces fluid, and approaches closely to some of our lower medium potencies, and we may well be satisfied with the dose and with the frequent repetitions. In order that our own physicians may prescribe it with more confidence, let us study its symptomatology. Allen gives us in his Encyclopædia, VI, p. 263, 8-10, eyes sunken, pupils dilated; 20, gums swollen and covered with a thin, adhesive, whitish coating; tongue with yellow coating at its base; buccal mucous membrane red and injected, ulcer in mouth spreads and is covered by a large gray leathery coating; 30, great redness of fauces with difficulty of swallowing; 94, general debility and extreme prostration, frequent fainting; 102, icy coldness of skin; 110, skin moist and cold.

Farrington in his Classical Clinical Materia Medica, p. 548, teaches: We have in the Cyanide of Mercury one of the very best remedies in diphtheria, especially when it is of the true malignant type, by reason of the presence of the prussic acid you will find it indicated in cases where the patient is very much prostrated from the beginning. The pulse is quick, 130-140, and has no volume. The membrane at first is white, covering the velum palati and tonsils; the glands soon begin to swell, and then the membrane becomes dark, threatening even to become gangrenous; weakness extreme; breath fetid. loss of appetite; nose-bleed sets in, and this a dangerous symptom; expectoration thick and ropy; harsh, barking, croupy cough, with dyspnœa; blueness of surface and extremities; quick, weak pulse.

Sellden goes a step further than Farrington, and believes that prevention is better than a cure, and as he is not an adherent to strong symptomatic individualization, he practices only from pathological indications. Diphtheria is to him diphtheria, and cyanide of mercury its prophet. Our younger colleagues might do worse than to follow the example of these Swedish physicians, but still our materia medica offers so many similia that he who reads well the symptoms of the patient cannot fail to find its counterpart in his materia medica, even though he owns only the condensed works of Hering, Lippe or Cowperthwaite. Stick to your flag and you will succeed.

SCHUSSLERISM AND HOMŒOPATHY.

It has been objected that the indications of Schussler for *Natr. Mur.* and those of homœopathy are not the same; that in some cases they are the opposite, etc., and therefore homœopathy cannot claim even a relationship with biochemistry.

Upon a careful examination of the provings, we find that no indications for this drug mentioned by Schussler are absent, though sometimes they are expressed differently; for instance to correspond with Schussler's symptom: "frothy bubbles of saliva upon the tongue," we have half a page of

Allen's Encyclopedia devoted to saliva symptoms, moisture of the mouth, tongue, etc.

Schusslerism is an *incomplete* homœopathy. The indications are scanty and no Homœopath would think of prescribing *Natrum Mur.* or *Silicea* upon them alone, so long as the provings offer a more complete and reliable guide.

The following we take from the *St. Louis Clinical Reporter* from an article entitled "Characteristics in Throat Diseases," by Prof. J. T. Kent.

Ferr. Phos.—"Throat inflamed, red and hot; some fevered face; painful swallowing when indications for other remedies are not clear. (This should not be given for the first stage of diphtheria, nor should any other remedy be given for the first stage of a disease, when there are clear, undoubted *indications for a remedy it* [the indicated remedy] *should be given*, and not until, should any remedy be thought of for the first stage.)"

This seems to be rather paradoxical. We are not to give a remedy for the first stage of a disease because it is the first stage, nor at any time except when there are "*undoubted indications for a remedy*," but we may give it "*when the indications for other remedies are not clear*"—that is, when we do not know what else to give! Jahr, in his "Forty Years' Practice," recommends Ipecac in intermittent fever when the indications for other remedies are not clear. This is given to "clear up the case." We know of no proving wherein the symptom, "when the indications for other remedies are not clear," has been recorded. "Consistency, Thou art a jewel."

We once asked one of our homœopathic nestors, who is considered an authority on pathology and therapeutics, whether he used Schussler's remedies. He informed us that he did, but always, according to the homœopathic indications as found in the provings, and then we were cautioned very strongly against the unhomœopathic theories of Schussler. "Where do you get indications for *Magnes. Phos.*," we asked. "From the combined pathogenesis of *magnes. carb.* and *phosphorous*," was the reply!—another case of consistency and scientific accuracy combined.



Salt in Migraine.—Common salt in appreciable doses in water has aborted paroxysms of Migraine, especially in those cases arising from stomach disorders.

An article appears in the *Homœopathic Physician* for April on ten of Schussler's remedies, homœopathically considered. In it are notes of two cases (from B. and D.) cured by *Kali Sulph.*, and some kind words about *Magnes Phos.* curing colic. Both are unproven remedies, but they were used by a pure Hahnemannian.

There are several interesting cases of cures by *Kali. Phos.* on record, but as the cures were not made by members of the I. H. A., the authenticity was probably questioned, as no mention appears in the above article.

SELECTIONS.

PHYTOLACCA CONIUM, AND ARSENICUM IODIDE, IN DISEASED MAMMAE.

By J. C. CULVER, M. D., BOSTON, MASS.

PHYTOLACCA, "poke-wood," "American night-shade," or cancer-root, is a native plant found in our uncultivated fields and meadows, or along hedges, and is known by agriculturists as "garget." It is also found in North Africa and Southern Europe, and supposed to have been transplanted from America. When young it serves as an article of food, as dandelion or spinach. When mature, its foliage is quite attractive, and one finds upon the same plant (which attains a height of five or six feet, with the main stalk several inches in diameter) large, rich-colored leaves, beautiful clusters of purple berries, green unripe fruit, and blossoms at the same time. Its appearance is thus very striking.

From the ashes of the stems and leaves, according to the United States Dispensatory, a large per cent of potassa is obtained,—not less than forty-two per cent of caustic alkali.

The officinal preparations are from the fresh root and ripe

berries, the former considered to be the most active. The berries yield a purplish-red juice, which is sweet and nauseous, slightly acrid. From analysis the root is found to contain tannic acid, starch, sugar, resin, and other substances.

Its Toxic Effects.—It is emetic, purgative, narcotic, produces violent tonic spasm of the muscles, great prostration of strength. Hale gives its analogues as ars., bell., arum., iris, kali bi., lach., merc. iod., sanguinaria and sulphur.

Hughes recommends employing the whole plant, and specifies the action of the drug as best seen in its power over certain manifestations of rheumatism and syphilis, its adaptations to certain throat ailments, and its influence upon the mammary glands. The tincture made from the berries only, seems to be better adapted to rheumatism. The use of it for granular conjunctivitis is mentioned.

Its influence upon the mammæ of cows is interesting. In the vicinity of its growth they are sometimes tempted to partake of its foliage. The udder soon takes on inflammation. Contact with the teats by the milkman gives pain, and the cow shows illness in her movements generally. Some of our intelligent dairymen are in the habit of steeping the garget, as they call it, and, adding lard to it, they apply the same to the swollen udder.

In the human female, mastitis is not uncommon, especially in the young mother. The breast is imperfectly emptied, attributable to sensitive or diseased nipples. Or the nipple is defective, imperfect, causing obstruction to perfect freedom in the flow of milk from the breast. This, and other causes; as sudden cold, continued pressure, may cause a disease in the otherwise healthy gland, and oedema results. The entire gland or portions of it, become indurated; motion of the arm is attended with pain, which is often very distressing, and particularly so if excoriation of the nipples co-exists. A sense of heaviness is observed preceding the pain. When left to its self for a short time, the skin becomes red, swollen, the temperature of the body is increased, and pyrexia is present; rigors occur later, and suppuration follows. Head-ache, anorexia, pain in the back, pain shoots down the arm from the axilla, and reflect symptoms are seen in unsuccessful attempts to urinate, with nausea accompanying.

The patients are usually of a scrofulous diathesis, nervous temperament, blond complexion. Here is your picture for the *phytolacca* internally. May we not imitate the farmer, and apply the same externally? As an inunction, it soothes the distended and inflamed surface, softens and subdues the inflammation. It acts like a narcotic in quieting the pain.

The third dilution does good work for these cases, taken internally. With the tincture, we would make, with cosmo-line, the preparation for outside application.

CONIUM, or spotted hemlock, is a native of Europe, but has become naturalized in our own country. It grows near old residences, on waste ground, or by the roadside. It is a plant growing from three to six feet in height. The blossoms, which are very small, appear in June or July. Their color is white. From the plant is exhaled a disagreeable fetid odor, at this time, and its effect is said to be very narcotic. The higher the temperature, and the dryer the atmosphere, the more powerful its effect.

Officinal preparations are from the leaves and fruit, which are mere seeds. Hughes, as in *phytolacca*, recommends the use of the whole plant.

According to the United States Dispensatory, water distilled from the fresh leaves has the odor of the hemlock, and a nauseous taste, but does not produce narcotic effects. The narcotic properties are secured from treatment in alcohol and ether.

Taken in half grain doses, it produces headache, vertigo. Its toxic effects were well known to the ancients, and used to destroy life. It produces diminished action of the heart, difficulty of speech, sensation of numbness, dimness of vision, and ultimately death.

By analysis, a very odorous oil, resin, and other substances are obtained from the plant, the oil being the principle containing the odor spoken of as existing in the vicinity of its growth.

Dunghlison says "Davidson's remedy for cancer" is said to consist of powdered hemlock and arsenious acid. Conium he speaks of as having been applied as a fomentation to cancerous and scrofulous ulcers. It has been used as a remedy

for various diseases of the skin, as psoriasis, acne, eczema, and prurigo; given in seirrhus, in mammary tumors; and the fresh leaves as an anodyne cataplasm.

From the provings of conium, Hahnemann found engorged glands, or a tendency to them, and recommended it in practice for such conditions, notably from traumatic causes.

He says it is anti-scrofulous, has a specific action on the female breast, dissipating its engorgements and tumors, and relieving its pains. During the catamenial period, it is noticeable in hysterical, highly nervous temperaments, that the breast is sensitive, irritable, sometimes painful. A blow, contact with any hard substance, or a closely fitting dress, even, with whale bones pressing upon the breast, at such times arouses inflammation more quickly. Age does not seem to make any difference, as we find these cases among our young girls as numerous as among our women of thirty-five and forty.

Tumors of the breast, involving a greater or less portion of the mammary gland, frequently come under our observation, which are traceable to injuries, not infrequently during lactation.

Over-use of the arms (in book-keeping, in persons employed in printing offices, in factories, in servants who do a great amount of sweeping) tends to bring on, in scrofulous persons, diseased conditions of the mammæ. I think housekeepers or house-servants, as far as my observation extends, are more often the victims. It may be due to the fact of their being subject to a constant change of temperature.

The cold compress greatly aids in reducing these swollen, indurated glands, and in conium we have a remedy which acts like gelseminum in quieting the hyperæsthesia of the nervous system. It acts like baryta carb. in reducing the œdema and softening the indurated portion, and like phytolacca in relieving the pain. Persevere with its use, and you will be pleased with your results.

ARSENICUM IODIDE.—Just how long this drug has been in use, I am unable to say. Hale gives it a place in his "New Remedies." He gives no special indications for its use in diseased mammæ, but quotes from Thompson its use in dis-

eases resembling cancer. It gives me pleasure to give you from my experience, results from its use in a few cases which were unlike in origin, occurring in youth and middle age.

CASE No. 1.—A widow of fifty-eight years. Never a mother. Business woman, of active temperament and strong constitution. She has been a victim, two years previous, to an attack of hemiplegia, from which she had not fully recovered.

She accidentally received an injury in the left breast, which at the time gave her some pain, but in the course of a few days passed off, and the injury was forgotten, until several weeks after, a dark red spot appeared above the nipple. It was three quarters of an inch in diameter, and covered a portion of the mammary gland, which, upon examination, seemed hard, like cartilage. It was extremely painful, and she described the pain as clawing, drawing, burning, giving her little rest by day or night. The pain passed to the dorsal surface, and down the arm of the affected side. The axillary glands were sensitive; and, from loss of sleep, and the great anxiety lest she was the victim of a cancer, her general health was impaired.

From recent success with the drug in the case of skin disease, I was led to employ it in this case. The sixth was given in grain powders. A slight improvement. We were both encouraged. Its administration was continued (omitting occasionally as other remedies were indicated for a cold, or other slight disturbances) for a period of eighteen months, when the gland appeared entirely healed. It is now three years, and we have heard no note of alarm.

CASE No. 2—A young woman. Single. Also of habit active. Age, thirty-three Scrofulous diathesis. Victim to varicose veins in both legs. Always overworked. Right lateral side of right mammæ indurated. Painful. No discoloring of the skin. Burning, heavy pain extends to dorsum. Arm of side affected, weak: Motion increases pain. Axillary glands sensitive, enlarged. "Cannot remember any fall or bruise," but thinks it possible she may have felt some sensitiveness in the whole side since she made a desperate

effort to save a friend from falling from a railroad bridge over which they were walking. Four months persistent effort was put forth in her behalf, during which time she received ars. iod. From time to time other remedies were made use of, but we were led to return to the first named, and we always felt rewarded. The result was satisfactory to both.

CASE No. 3.—Single woman, thirty-five years of age. Worked in a chocolate-factory. Had to use her arms rapidly and constantly. When the case came under observation, a portion of the breast had been removed by a friend applying a plaster which she had in her possession, supposed to be efficacious in the removal of cancers, this person supposing she had one. The breast was entirely healed on the affected side, but for two years she had been treated by a quack for a tumor upon the inner side, towards the sternum. Upon examination and consultation with Dr. Talbot, the portion of the gland affected was decided *not* to be in a cancerous condition. It was indurated, gave her pain in the arm of the affected side, was weak and almost useless; but the axillary glands were not enlarged or sensitive. He advised perfect rest, and remedies to be given, phytolacca, conium and asterias rubens; the three to be given, one following the other; the administration of each remedy to be continued a week. The progress was satisfactory until necessity drove her to her work again; then appeared more acute symptoms than before. Ars. iod. was given, with success. No further trouble has been experienced. The whole treatment occupied the most of two years.

CASE No. 4.—This was a case of cancer; the patient, eighty years old; of scrofulous diathesis, but of active temperament and cheerful disposition. Had been fighting the terrible suffering very privately, not allowing her best friends to come into the secret, until the diseased mass was sloughing off and becoming offensive.

It occupied the left breast, and already a large portion of the gland had disappeared. Ars. iod. relieved the burning pain, gave quiet sleep, and did greatly mitigate her sufferings to the end.

OPHTHALMOLOGY AND OTOTOLOGY.

DEPARTMENT CONDUCTED BY H. C. FRENCH, M. D.

In the March number of the *North American Journal of Homœopathy* is an article by Dr. Chas. Deady, on "The Pathology of Conjunctivitis Trachomatosa," which merits more than a passing notice. In no department of ophthalmology is there more confusion than in the relation of the different forms of palpebral conjunctivitis as described in the books. Dr. Deady has started a line of thought and research, which, if carried to its legitimate fruitage, must result in a better understanding of disorders which at present are greatly confused in their pathology and aetiology. Undoubtedly a want of accurate knowledge of the nature of the simple forms of conjunctivitis has resulted in excessive and irrational measures in dealing with diseases which, under proper hygienic conditions, would recover spontaneously. The milder forms of follicular conjunctivitis are undoubtedly often converted into incurable trachomas by too energetic treatment. The frequent merging of the simpler with the graver troubles in the pathological picture, suggests the advisability of leaning to the side of simplicity and mildness in the selection of curative agents. Blue-stone is the active agent in the production of many cases of trachoma which need never have gone beyond the stage of simple catarrhal or follicular conjunctivitis.

The meeting of the State Society will follow closely this issue, and let us hope that Ophthalmology will receive the attention which its importance deserves in the convention.

THE EYE IN DISEASE.

A physician in New York, who has made a lifelong study of the eye, thus sums up his experience: Falling of the eyelid indicates paralysis of the 3d pair of nerves. Inability to close the eye indicates facial hemiplegia and cerebral disease.

Yellow lamina indicates liver disease. Ecchymosis into the conjunctiva indicates laryngitis. Redness of the conjunctiva with watery discharges from the eye indicates the initial stage of eruptive fevers, usually measles. If the tears flow freely indications favorable. Spots upon the cornea indicates strumous constitution. Dilatation of the pupil indicate fatigue, worms in the intestines, meningitis in second stage, and blindness occasionally. Atrophy of the optic nerve, epilepsy and chloroformism. Unequal dilatation of the pupils indicates progressive paralysis. Contraction of the pupil indicates tabes dorsales. Deformities of the pupil shows Iritis or syphilis. Cataract in the old is usually of diabetic origin.—*News*.

Colleges, Hospitals and Societies.

STATE SOCIETY.

The twelfth annual meeting of the California State Homœopathic Medical Society will convene at the Hahnemann Hospital College, in this city, on Wednesday evening, May 9th, at 8 p. m. A full attendance is expected. The Chairmen of the Bureaux are as follows:

Clinical Medicine, C. H. Thompson, M. D., Santa Rosa; Obstetrics, H. L. Stambach, M. D., Santa Barbara; Diseases of Women, E. R. Ballard, M. D., San Francisco; Diseases of Children, L. J. Kellogg, M. D., San Francisco; Surgery, J. J. Miller, M. D., San Jose; Ophthalmology, H. C. French, M. D., San Francisco; Materia Medica, Samuel Lilienthal, M. D., San Francisco; Medical Education, etc., G. E. Davis, M. D., San Francisco; Electricity, J. W. Moliere, M. D., San Francisco.

It is the duty of each Bureau to present a report, thus aiding in making the meeting a success. Those who contemplate joining should prepare an initiation paper, not that such is required, but that it is a good habit to get into.

NEW LICENTIATES.

The following have been granted licenses to practice by the Homœopathic Board since our last issue:

C. E. Connor, Pomona, Chicago Homœopathic College.....	1888
C. F. Bennett, San Diego, Chicago Homœopathic College.....	1884
L. Gregory, San Jacinto, Chicago Homœopathic College.....	1887
E. P. Lanthurn, San Rafael, Pulte Medical College, Cincinnati.....	1882
J. C. Harrison, National City, Bennett Medical College, Chicago.....	1882
H. H. Crippen, San Diego, Homœopathic Hospital College, Cleveland..	1884
C. L. Dyer, San Jose, New York Homœopathic Medical College.....	1885

The following resolution has been adopted by two of the Boards of Examiners of California, and will probably be adopted by the third at its next meeting.

WHEREAS, the law to regulate the practice of medicine in the State of California provides that the Board of Examiners, in the discharge of its official duties, shall determine what colleges, the diplomas of which are presented in applications for certificates, are "in good standing;"

And, whereas, it is apparent that the protection of the public, and the best interest of the profession require a higher standard of medical education than that which is now adopted by many medical colleges, therefore,

Resolved, That on and after April 1st, 1891, the Board of Examiners, of the Medical Society of the State of California, will not grant certificates to practice medicine on diplomas issued after that date, by colleges which do not require that all candidates for graduation shall have studied medicine not less than three full years, and shall have attended not less than three full regular courses of lectures delivered during three separate years.

THE COLLEGE.

Prof. Albertson will deliver the opening lecture at the College on Tuesday, May 1st. A good class is expected; several have already matriculated. The clinics at the Dispensary are the best on this Coast; a record should be kept of them and an annual report published in connection with the College announcement. This would show up our clinical advantages in good style.

THE AMERICAN INSTITUTE SESSION — PRELIMINARY NOTICE.

EDITORS CALIFORNIA HOMŒOPATH:—The American Institute of Homœopathy will convene in its forty-first session and celebrate its forty-fourth anniversary at the International Hotel, Niagara Falls, New York; commencing Monday evening, June 25th, and closing Friday noon, June 29th. The local Committee of Arrangements has secured suitable rooms for the general and sectional meetings, as well as for committees, etc. The capacity and accommodations of the hotel are ample for all members and other physicians and their friends who may be in attendance. The Committee on Railroad Fares expects to secure reduced rates over all the trunk lines and branches. Full particulars of hotel and railroad rates will be announced hereafter.

Among the general subjects to be considered during the session, may be mentioned the following: "Results from Homœopathic Medication;" "Provings, and Verification of Provings of Zincum Met. and its Salts;" "Indications for Zincum in Nervous and Uterine Diseases;" "Surgery of the Intestinal Tract;" Operations upon the Gall-bladder;" "Accidental Complication of Gestation;" "Uterine Therapeutic;" "Nervous Diseases of Infancy and Early Life;" "Acute Inflammations of the Eye, Ear and Throat, and their Consequences;" "Influence of External Agents in causing Disease;" "The Relation of Nutrition to Nervous and Mental Disorders," etc., etc.

Reports of great interest will be presented upon the subjects of, "Statistics of Homœopathy;" "Pharmacy;" "Drug Provings;" "Medical Education;" "Medical Legislation;" "Medical Literature;" "The Colleges," etc.

Any member of the Institution engaged in the preparation of a paper, and who has not already reported its title to the appropriate bureau chairman, should do so at once. Papers should be completed at the earliest possible day, and those likely to consume more than fifteen minutes in reading, should be accompanied by an abstract. See Article VII, Section 11, of the By-Laws; also see Resolution adopted July 1st, 1887, Transactions, page 848.

It is very desirable that all requests for statistical and other information, sent out by Dr. T. F. Smith, of New York, Chairman of the Bureau of Organization, Registration and Statistics, should be responded to *without the usual delay*—a delay that always makes it difficult for him to complete his report in time for presentation to the Institute.

Any physician having special knowledge of the life, labors and character of any Institute member, who may have died during the year commencing July 1st, 1887, will confer a favor by communicating with Dr. Henry D. Paine, the Necrologist, No. 134, Madison Avenue, New York.

Each State or Inter-state society is entitled to be represented at the session by two delegates, and one additional delegate for every twenty members; each county or local society by one delegate; each hospital, asylum, dispensary, and journal, one delegate; each college two delegates to compose the Intercollegiate Committee of the Institute. It is not necessary that delegates be members of the Institute, yet they are entitled to all the privileges of membership except voting and eligibility to office.

The "sectional" plan of scientific work, inaugurated last year, proved a step in the right direction, and the Committee having the matter in charge is working earnestly to improve and perfect it. Under the operation of the new method last year, while the aggregate text of the essays was diminished, the amount of "discussion" was increased about sixty per cent., requiring for its publication ninety-four closely printed pages of the *Transactions*. The *quality* also of the discussion was of a higher order than heretofore. Under the improvements likely to be instituted this year, it is reasonable to anticipate a session successful in some respects beyond all precedent.

It is suggested that in those States and localities in which the Institute membership is small, the offices of the State and local societies should provide for a canvass of their respective districts, for the purpose of increasing their representation in the National Society. Especially should the "active members" of local societies be induced to identify themselves with the Institute and its work.

The terms of membership are: Initiation fee, \$2; annual dues, \$5. Blank applications for membership may be obtained by addressing the undersigned.

The General Secretary's circular, including the entire programme, will be issued some three weeks prior to the session. Full details will be furnished to all the homœopathic journals in time for publication in their June issues.

PEMBERTON DUDLEY, M. D.,
General Secretary.

S. W. Cor. Fifteenth and Master streets, Philadelphia, Pa.

CLINICAL ITEMS.

Gelsemium is the remedy in dysuria from stricture, and will rarely fail in enabling the patient to pass urine in from four to eight hours. (Scudder.)

Calabar Bean Extract.—1-50 grain doses every half hour for six or eight doses for flatulence and sensation of fluttering at pit of stomach worse at menopause.

Bellis per. 1.—For effects of masturbation, "auto-traumatism" of Dr. Burnett. Its action is often marvelous.

Apocyn. can. is to be remembered in passive menorrhagia. Flow too profuse, too long and too frequently repeated. Also in rheumatism, with tendency to œdema, and a peculiar blanched, glistening appearance.

Asclepias tuberosa is especially a child's remedy, allays nervous irritability, is slightly sedative, and certainly increases the secretion from the skin. (Scudder.)

Lithia benzoat. is indicated by deep-seated pains in the loins, pain in the small of the back, uneasiness in the bladder, with frequent desire to pass urine and deposits of uric acid.



There is a particular kind of gastric irritation characterized by painful digestion, distress after eating, slow digestion of food in the stomach, with formation of gases and fermentation, vomiting of food or injeſta mixed with mucus. Rx: Colorless Sol. Hydr., 1 oz.; Bismuth, subnit., 1 oz.; Pure Pepsin, 1 oz.; Aqua, 3 oz. A teaspoonful before meals—in bad cases also *after*. (Hale.)

Kali mur.—In injuries of the skin I have found *kali mur* to act very favorably applied in compresses, especially in those cases where the sensation of *burning* is marked.—T. A. Pop. Zeit.

Apomorph. is invaluable in capillary bronchitis. In doses of 1 to 2 grains of the 3rd dec trit. every 1, 2 or 3 hours it acts promptly, producing an easy expectoration of thick, tenacious phlegm which otherwise so often strangles the little sufferer.

Chelidon. has dry cough through the day, with pain and stitches in the *right* side, with hoarseness each evening at five o'clock.—*Hom. Phys.*

Ustilago.—Hæmorrhage is of mixed character, partly coagulated. Flow is passive, slow and long continued, *Menorrhagia*, with vertigo during climateric period. Depression of spirits accompany.

Phosphor.—Has feeling of *weakness* and coldness or emptiness across abdomen, and sensation of heat between scapulæ.

Indigo in Headache.—Sensation as if brain was frozen.

Asarum resembles *Ledum* in the chilliness and may be of service in cases caused by alcoholism. Myalgia in those parts where muscular tissue is plentiful.

Glonoine as a remedy in uraemic conditions is spoken of as most valuable, sometimes giving relief after coma has supervened.

The California Homœopath.

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THE CALIFORNIA HOMOEOPATH, No. 234 Sutter St., San Francisco, Cal.

EDITORIAL.

WE wish to call the attention of our readers to the communication elsewhere published by the General Secretary of the American Institute of Homœopathy, and would urge upon all our Pacific Coast physicians the duty of joining the oldest national medical association. The Institute is the defender of our professional interests, and deserves a better support than it is now receiving. We trust the next meeting will show a large increase of membership.

A FEW OF OUR EXCHANGES.

The Minnesota Medical Monthly: Among our younger journals we have the above, and no journal comes to our table that is more welcome. It is in its third volume, and is de-

voted to homœopathy in the Northwest. We have a slight acquaintance with the editor-in-chief, Dr. Wm. E. Leonard, and regard him as one of our best materia medicists, and are confident that if each number of the *Minnesota Medical Monthly* contained one of his inimitable lectures, the circulation of the journal would be greatly increased—at least we would have something good to copy.

The Chironian: The advent of the *Chironian* marked a new era in homœopathic journalism. It was the first one emanating from the students of a college—the New York Homœopathic. It is now in its fourth volume, and its general make-up, excellent editorial and business management, make it a most valuable journal. It is of special value and interest to the alumni of the New York Homœopathic College, and should be well supported.

The Medical Institute: This, like the *Chironian*, is a college journal, and is edited mainly by the students of “Old Hahnemann.” In its pages we find many interesting lectures delivered by members of the faculty of the college, original articles by students, alumni and others. It is a bright, newsy journal, well edited withal,—its one marring feature being the abominable practice of mixing up advertisements with reading matter. This interleaving of “ads” detracts from the appearance and value of many of our best journals.

American Homœopathist: Another excellently edited journal with the same marring feature as the preceding. In this case the flaming interleaf is *Kraftily* inserted just previous to the last reading leaf, probably that it may escape notice. We are sorry to learn that the *American Homœopathist* is not more carefully read! We have always considered it a most excellent journal; more especially has it improved under its present editorial management.

The New York Medical Times: We count among our exchanges allopathic, eclectic and scientific, as well as homœopathic journals. The above, however, cannot be classified; in truth there is no other medical journal of its kind pub-

lished, and we are happy to record this fact. It is the *Tramp* of medical journalism, sailing under no flag, having no object in view; a deserter, even a traitor to its foster parent, homœopathy. We gladly exchange with it, in the hope that by sending its editors THE CALIFORNIA HOMŒOPATH, they may at least have a monthly dream of the good old *Homœopathic Times*.

The Clinique: This excellent journal is devoted to the publication of abstracts and proceedings of the Clinical Society of the Hahnemann Hospital of Chicago. It is, as its name indicates, a purely clinical organ. Its editors are Professors R. Ludlam and E. S. Bailey, which fact alone renders further comment on its excellence unnecessary.

Homœopathic Physician. — This able representative and champion of Hahnemannian homœopathy, pure and simple, is always a welcome visitor at our table. If the Purists appreciate the single-heartedness of this journal as much as we miserable backsliders do, its editors may rest in the consciousness of a duty well performed. We wish every homœopathic physician would subscribe to this journal, and gauge thereby the downward tendency of his daily routine prescriptions, and possibly it may lead him to something better, and even if it fail in this, its monthly visits will scatter good seeds in his mental soil that may bring forth fruit sometime when most needed.

Medical Advance:—This, like the *Homœopathic Physician*, advocates pure homœopathy, but is not characterized by so much discrimination in the selection of its contributions as the other. It has a horror of the "pathological livery," and tries to do its share to disenthral modern liberal homœopathy from its coquetry with old school methods. May it succeed.

Southern Journal of Homœopathy:—We feared at one time to lose this most excellent journal, and we are delighted to know that Brother Fisher has received sufficient encouragement to permit its continuance for another year. We hope

by the end of that time the majority of physicians will feel as we do—that we cannot do without it. In appearance the Southern journal leads. It is a beauty, especially the January number. We are not so much stuck on the color of the February and March numbers. The general get-up and newsy character of the journal, combined with the fact that it is *edited*, renders it one of our A No. 1 journals.

CORRESPONDENCE.

From a recent communication of Dr. H. N. Griswold, a former Secretary of the Board of Examiners, to the present Secretary, we extract the following:

“Has it occurred to you that the profession and the people are suffering from an abuse, which the former sustains without protest, quite equal in its baneful results as practiced by the irregular and uneducated, in the multiplication of colleges and the flooding of a defenseless community with crowds of new fledged doctors, male and female, with their ceaseless volumes of *inexperience*.

Organized mechanics regulate the number of new apprentices, determine approximately how many can secure adequate employment at living compensation, and the time is not distant when professional men will feel obliged to take action in that direction, not only to protect themselves but to save the public from being overrun by too large a proportion of *inexperienced* practitioners.

Yours fraternally,

W. N. GRISWOLD.

NOTE.—Back numbers of this Journal can be obtained by new subscribers who desire the complete volume. Interesting articles on the tissue remedies occur almost in every issue.

Lycopus is an excellent remedy when the heart's impulse is feeble, the patient nervous, irritable and extremities cold. Remember it in Exophthalmic Goitre.

Rhus for sleeplessness due to aching legs.

Conium when legs are cold and torpid.

Naja sleeplessness due to constant coughing.

Raphanus 1x. Sexual Insomnia, immoderate sexual desire.

Fluoric acid.—Hob-nailed liver of drunkards.

Personal Notes, Locations, Etc.

W. N. GRISWOLD, M. D., has removed to 122 Turk street.

DR. L. GREGORY has settled at San Jacinto, and DR. C. F. BENNETT at San Diego.

DR. E. B. PHILBROOK has located at Pasadena, and is the partner of Dr. J. K. WADE.

DRS. J. C. and FLORA S. GLEASON have settled at South Riverside, California.

FOR SALE.—A good practice located at Fairfield, Solano county, California. For information, address: H. L. BRADLEY, M. D., Fairfield.

DIED.—In Los Angeles, March 31, DR. F. HILLER, Sen., formerly of San Francisco. The doctor leaves a large family to mourn his loss.

DR. G. W. BURLEIGH has an office at No. 14 Geary street, and devotes himself especially to diseases of women. His residence is at 778 Eleventh street, Oakland.

DR. J. L. MEYER has returned from his tour through Oregon and Washington Territory, and reports a prosperous condition of Homœopathy throughout that part of the country.

BAKERSFIELD, county seat of Kern county, is an excellent opening for a Homœopathic physician. It is a large place and we hear there is no Homœopath in the county, and we believe one is wanted immediately.

DR. GEORGE H. MARTIN, who has been spending the winter among the medical lights of New York, is again with us, and this time permanently. He locates in association with DR. CURRIER, at 921 Geary Street.

CHARLES L. DYER, M. D., a graduate of New York Homœopathic Medical College, has located in San Jose. We have been personally acquainted with Dr. DYER for many years, and know his excellent qualities as a man in every respect, and trust he may succeed in surrounding himself with an appreciative clientage.

DR. HORACE F. IVINS, Philadelphia's Homœopathic throat and ear man, has recently added to his popularity by taking unto himself a wife. The doctor is to spend the summer months abroad. This is the kind of a honeymoon we should like every year. Doctor, when in Wien, write to us and tell us about Ronacher and the Krankenhaus.

DR. H. H. CRIPPEN, of the New York Ophthalmic Hospital, formerly at the Bethlem Royal Hospital, London, England, and formerly House Surgeon to the Diakonissen Institute, New York City, has located at the Fifth Avenue, 1248 Fifth street, San Diego, California, where he will devote special attention to the treatment of diseases of the eyes, ear, nose and throat. Office hours: 12 to 4 P. M., and 7 to 8 P. M.

PROF. R. LUDLAM, the well-known gynæcologist and surgeon, of Chicago, favored us with a call, during his recent visit here. We also had the pleasure of spending a pleasant hour in his company at the Palace. The Professor is one of those men with whom it is a pleasure to meet, and in whose company a person cannot remain a moment without being made better and wiser. Our only regret was that he remained in town so short a time. The sixth edition of the Professor's excellent work on Diseases of Women is just out. (See book reviews.)

The San Diego *Sun* of February 16th, says: "Upon invitation of Dr. G. W. Barnes, a party of his professional friends yesterday evening partook of an elegant dinner. A post-prandial social hour was spent in the discussion of matters of general interest. Dr. Barnes proposed the following sentiment: 'May all who unfurl the banner of Homœopathy in San Diego, bear it aloft nor suffer it to trail in the dust. May they creditably represent their faith and creditably practice their art.' The sentiment was fittingly responded to by Drs. Polhemus, Mertzman, Gamber, Morgan and Crippen."

BOOK REVIEWS.

Medical and Surgical Lectures on the Diseases of Women. By
R. LUDLAM, M. D. Halsey Bros., Chicago.

The sale of medical works is a good index of their popularity and value, and the fact that the fifth edition had been out of print for a year, with constant demands for the work, made the issuing of a sixth edition a necessity. Professor Ludlam is one of the most successful operators and teachers of gynæcology in our school, and the hundreds of students who have listened to his lectures and who have witnessed his operations, would alone make a demand for the new work. But aside from this, our homœopathic practitioners all over the country who are called upon to treat the many ills with which our modern ladies are sufferers from, feel the necessity of a practical text-book on this subject, giving not alone the surgical method of treatment, but the medical treatment as well.

Undoubtedly one of the reasons of the success of Professor Ludlam's work is the colloquial style in which the book is written, which makes it most attractive reading, and many who are in the habit of skimming over a book will find themselves attracted and *studying* before they are really aware of the fact,

There have been several new chapters introduced, viz: two on the Pathology of Ovarian Tumors; one on Explorative Laparotomy and Tapping; one upon ovariectomy; one on the After-Treatment and the Results of Ovariectomy; and one upon the Diseases of the Uterine Appendages, including the Battey Tait operation. The chapter on Laceration of the Perineum has been enlarged, but we miss Emmet's latest, his new operation, so-called. Perhaps Prof. L. omitted it advisedly, as the opinions as to its efficiency seems still to be an unsettled question.

The only fault that we have to find is that the medical portion is not as thorough as we should desire. Our provings of drugs, as far as female provers are concerned, are very meager, and the symptoms as put down in our works of materia medica, leave us in the lurch as to their being purely subjective, or whether they are accompanied by actual changes in the generative organs. The bulk of our physicians are therefore dependent upon the clinical experience of our Professors whose hospital appointments give them the opportunity of studying the effect of our drugs upon the patient, and who should lose no opportunity of giving us reliable clinical symptoms. The homœopathic therapeutics of the diseases of women has yet to be written. Let us hope that with the seventh edition Professor Ludlam, who has both the ability and the advantages, may supply the present omission.

J. E. L.

A Practical Treatise on the Medical and Surgical uses of electricity.

By Drs. BEARD and ROCKWELL. Sixth Edition. New York: Wm. Wood & Co., 1888.

The changes and additions in this work, as successive editions have been issued, have been confined mainly to physics and physiology and the department of nervous diseases, where electricity has wrought its best results. While this agent is far from being a panacea, yet its increasing range of usefulness in medicine may be best illustrated by reference to these various additions. In the second edition the chapters on Electro-Physics and Physiology were largely rewritten; the method of central galvanization described and illustrated, electro-surgery more fully treated, and the relation of electricity to the diseases of children and of the skin considered in detail. In the third edition were given the highly satisfactory results following the treatment of exophthalmic goitre by galvanization of the sympathetic and of some of the sequelæ of acute diseases by general faradization. The chapter on Electro-diagnosis also was largely rewritten. A fourth edition was rendered necessary by a revival of the use of Franklinic electricity, due to vastly improved appliances, and contained also the extraordinary results following the application of dynamic electricity to cases of extra-uterine pregnancy.

The fifth edition discussed facts hitherto, and even now, but little appreciated, concerning the induction coil, its varieties, and the differential indications for their use. These statements the author deems worthy of careful consideration, and believe that further experience will result in still more important, as well as more definite deductions. Within the past two or three years Apostoli, of Paris, has by his experiments and the results that he has succeeding in obtaining, greatly enlarged the domain of electricity in gynecology. The revision in the present edition, therefore, has been mainly restricted

to this subject, and the chapter on the Diseases of Women almost entirely recast. The methods through which these better results in gynecology are obtained do but confirm the truth of the observations made in the Preface to the third edition, to the effect that the real scientific basis for the use of electricity in medicine and surgery is found in electro-physics more than in electro physiology.

A Practical Treatise on the Diseases of the Hair and Scalp. By G. T. JACKSON, M. D.; New York, E. B. Treat, 1887.

Cleanliness is next to Godliness is the first lesson which Jackson teaches, and sanitation takes also here the first rank, for prevention is better and easier than to cure. Physicians to boarding schools and orphan asylums know the value of these sanitary measures, especially as morbid dispositions call it scrofulous, psoric, or whatever you like, are often the soil or which cutaneous diseases flourish, and which only can be suppressed, but not eradicated, by external means. We are pleased to see that Jackson takes a middle ground, and all through the work we see constitutional treatment recommended. The vast literature on diseases of the hair and scalp is really overwhelming, and we feel thankful that the author has condensed them into a moderately sized volume of 300 pages. In a world where baldness nearly reigns supreme, such a book may aid us in recommending some treatment which may stop the death of a part so necessary to beauty, but just here the author fails, because the patients will go on in their usual mode of life and the girls will marry even a baldheaded sinner. Read, digest this treatment, use internal treatment and cleanliness, and strong measures may then only be exceptionally needed.

S. L.

Diseases of the Heart. By ALONZO CLARK, M. D., Emeritus Professor of the Principles and Practice of Medicine, Coll. of Phys. and Surg., New York; E. B. Treat, Publisher, New York, 1888.

This is the sixth volume of the "Medical Classics" series, published by E. B. Treat, and a very acceptable acquisition to the list. It cannot fail of being of great value to practitioners, as it contains the results of a large and pre-eminent experience.

The last chapter treats of the effects of certain drugs on the heart which we regret is rather fragmentary, but as far as it goes, very suggestive and interesting.

1. **Transactions of the Hom. Medical Society of the State of New York, 1887.**
2. **Transactions of the Hom. Medical Society of the State of Ohio, 1887.**
3. **Transactions of the Hom. Medical Society of the State of Pennsylvania, 1887.**

We are chagrined that we have to acknowledge that in the transactions of the State of New York medical lore may be abundant, but for several years passed we miss in the meeting as well as in their transactions, the true ring

of homœopathic materia medica. Have all the physicians of that great State turned iconoclasts, and worship more at the shrine of medical science than of medical art? Let them emulate their next-door neighbor, and we may then expect transactions worthy of the State and worthy of homœopathy, for we know that there is good material there, and we beg them to stand by their colors, as New York ought to be always excelsior.

Why is it that Pennsylvania is the banner bearer of homœopathy, and that we can never open the transactions published in the Keystone State without being fully repaid for our time and for the outlay? The transactions of '87 are full of good things, and Philadelphia and Pittsburg have done equally well. We do not speak only of the Bureaus of Materia Medica and Clinical Medicine, but Smedley gives sound treatment on gynæcology; and the ladies, God bless them, show that they are up to the mark; and Drs. Johnson and Schreiner deserve fully the success which crowns their strict homœopathic treatment.

I always thought that Ohio is rather a metaphysical philosophical State, and I am only sorry that I cannot agree with my good friend, Dr. Buck, about the difference between mind and soul. I always advised my students to leave the soul to the theologians and the mind to the body, and then we can verify *mens sana in corpore sano*. How about hypnotism? The old regulars in France and Germany believe in it and teach it, and when such men as Charcot and Krafft-Ebbing are its defenders we might just as well agree with them. Now dynamis is put ahead of matter, and we want, despite of the assertion of our worthy friend, Schneider, a more powerful microscope than so far has been made, to find out the matter even in as low a potency as the thirtieth. Oh! that *vis medicatrix naturæ* may be a great physician, but just stubborn, chronic affections, especially on a psoric, sycotic or syphilitic basis, are the touchstone for successful treatment, and here a faithful selection of the *similimæ*, the single dose and tincture of time, have often driven out the devils who harass poor mortals. Is there any witchcraft in high potencies?

There is one bureau in the transactions of all three States which deserves unstinted praise, and that is the Bureau of Sanitary Science, and no wonder Ohio stands foremost with a Beckworth for chairman. Bushrod W. James must have been too busy with his own private hospital, or else he would have given us more, and we are always eager to read the emanations on sanitation from our friend.

Prevention is better than cure! Homœopathy is alive and prospering. Now let us go and attend the meeting of the American Institute, and by our deeds prove that we are faithful followers of Samuel Hahnemann. S. L.

BACK NUMBERS.

Those who receive sample copies of this Journal will please consider it an invitation to subscribe. The volume commences in January. Back numbers furnished.

POPULAR DEPARTMENT.

THE MANAGEMENT AND CARE OF CHILDREN.

By WM. BOERICKE, M. D.

IV.

Next in importance to pure cow's milk as an article of diet for infants, prepared as stated in the last article, comes

Cream. One part of pure cream to six and very soon to five and four parts of water and a tablespoonful of sugar of milk to a pint of this mixture forms an excellent food, and one strongly recommended by many physicians.

Dr. J. F. Meigs used with great success a mixture of equal parts of milk, cream, lime water and a weak arrowroot water with a little sugar. The following very closely resembles mother's milk: Fresh cream 2 tablespoonfuls, cow's milk 1 tablespoonful, lime water 2 tablespoonfuls, warm water 3 tablespoonfuls, add sugar of milk 1 teaspoonful. Occupy about 5 minutes in warming, stirring gently meanwhile, but do not boil. Add a small pinch of salt.

Condensed milk has been and is very popular as a substitute for mother's milk. The great objection to the ordinary condensed milk is the large proportion of sugar it contains, nearly 40 to 45 per cent., and the relative small proportion of albumen and fat. Now by diluting it as required we either have too much sugar in our preparation or too little of the other nutrient constituents. In either case it fails to be a perfect food to the growing infant. Still it cannot be denied that many children fed upon it certainly seem to thrive, nevertheless I should be afraid to use it exclusively after the first few weeks. It ought to be diluted with eight to ten parts of warm water, the tendency being to preparing it too strong. It cannot be denied, on the other hand, that intestinal catarrhal affections, and if continued for longer periods, rickets, are especially frequent in children fed exclusively on ordinary condensed milk. The nutritive value and digestibility of it may

be increased by using oatmeal or barley water as a substitute for ordinary water in its preparation, and which should by no means be neglected, if condensed milk be employed after the third month. But even then I do not think it as desirable as either cream or pure cow's milk.

Oat-meal water for this purpose is made by soaking a teacupful of oat meal in a pint of water, with a little salt added, over night; strain thoroughly through a thick napkin next morning. To make *Barley water*, take a teacupful of pearl barley and soak it for half an hour in a little lukewarm water previously salted; drain off the water, pour the barley into a pint of boiling water, and let it simmer one-half hour; when done, strain into a pitcher--(*Gatchell*). By giving the preference to the oat-meal water if there be a tendency to constipation, and to the barley water if the tendency is to looseness, they can be regulated without any trouble. Condensed milk, prepared without sugar when obtainable, would undoubtedly be unobjectionable, and may be the sole reliance in traveling, and whenever a good article of cow's milk is not readily obtainable. Quite recently importations of a German article, Loefflund's Cream Milk, have been made, and we are now in possession of a most excellent article of what seems to be real creamy milk. It is a sterilized, condensed milk, free from all adulterations, such as cane sugar, glycerine, boracic or salicylic acid, etc. Diluted with the necessary amount of water, it equals in appearance and taste the best milk. If its present quality can be maintained it does seem that we have an ideal article, superior even to ordinary city milk, where we are not certain of the condition of the dairies and the food of the cows which so materially affect the quality of the milk.

A very good preparation is the following, which may come into use when from any cause substitutes as prepared above do not agree.

Take a piece of isinglass or gelatine about two inches square and soak for a short time in one-half pint of cold water, and then boil until dissolved for ten minutes. To this is added, with constant stirring, a teaspoonful of arrowroot rubbed smooth in one-half pint of milk, and just before re-



moving from the fire one to two teaspoonfuls of cream and a little sugar is added, the quantity of both to be increased according to the age of the child. (Underwood.)

It seems to me that in all cases of artificial feeding of infants, a reliance on the methods above described will secure the most desirable end—the healthy growth and development of the child. Only when all these fail, and the failure is not dependent upon faulty methods of giving the food, as pointed out below, is it advisable to give one or the other of the numerous prepared substitutes. Of the more popular of these are undoubtedly Mellin's, Nestle's and Horlick's, and also a more recent candidate for favor, Reed & Carnrick's. But I would confine their use rather to diseased conditions when, according to the needs of the organism, one or the other, according to its composition and digestibility, may be required, relying on the various forms of milk, as above described, for regular feeding.

I have said nothing of the wet-nurse, as her modern substitute is undoubtedly the feeding-bottle. It is so difficult to get the right person for so delicate and important a function, and with all so expensive, that practically it is ever a questionable procedure. Should one be determined upon, the selection must always be entrusted to the family physician.

Much of the success of artificial feeding depends upon the care exercised in preparing and administering the food. *Perfect cleanliness* is the one condition absolutely required. This is so important that it will necessitate the mother's own supervision as a rule. Get *two* nursing bottles, the Acme is the best, and while one is being used keep the other, with all its belongings, in a basin of water. Once daily, the bottle, tubes and mouth-piece (for no rubber or other attachments ought to be used that cannot be scrubbed both inside and outside) must be thoroughly scalded in hot water and soap, or soda by adding a teaspoonful of cooking soda to the tumbler of water. Directly after each using, the nursing bottle must be thoroughly washed out. Besides this washing and daily scalding, I advise two or three times a week having them dried in the sun and aired. In this way only can they be kept sweet and free from all deleterious accumulations

that would tend to give a hiding place for fermenting germs, damaging the milk and producing sickness in the child. When thus cared for the objections to the nursing bottle with tubes really vanish, and their advantage over others remain. For by their means the feeding can be more readily regulated, and is done with much more facility than with the ordinary bottle with merely a nipple. However, remember the one condition for their use is the perfect care and cleanliness described; if this cannot be assured the long-tubed nursing bottle becomes an abomination, and in that case it is best to obtain a simple glass bottle, with a slightly flaring neck, over which the rubber nipple can easily be fastened. Black rubber nipples alone should be used. Sometimes the holes in the nipple are very small and must be enlarged with a darning needle. Still the milk should not run out in a stream, but only *drop by drop*. Again the flow can be regulated in older infants who draw vigorously, by tying a loose knot in the tube, which is one of the advantages of the tube bottle. For the food must not be received too quickly nor too easily, and not without some exertion at sucking -- the very conditions nature makes in furnishing the breast-milk to the suckling babe. The chief objections to all nursing bottles is that they allow too rapid and free swallowing of the milk, thus overdistending the stomach and producing colic and indigestion. Again, the baby's food should always be given warm, about 98 degrees. F. *Never give cold milk to an infant*, it will disagree with it. Never allow the baby to continue to suck after emptying the bottle or on the nipple without the food. Aside from the injurious results, as seen by the colic diarrhoea, etc., it establishes a vile habit, which will tyrannize over child and mother for a long time.

FAITH CURES.

Notwithstanding the constant exposure of the arrant knavery connected with the business, the faith-and-mind-cure quacks continue to do a thriving business. It seems to do little good to expose the absurdity of the so-called philosophy of these pretenders, for there are apparently plenty of people who delight in being humbugged.—*Good Health*.

DOMESTIC RECEIPTS.

1. *For Exhaustion.*

Beat the yolk of a fresh egg, add one dessertspoonful of milk, one dessertspoonful of cream, a small quantity of powdered loaf sugar, and one tablespoonful of brandy.

2. *A Diet Drink for Colds.*

To one pint of barley-water add two oz. of gum arabic and 2 oz. of sugar candy, to be boiled in the barley-water whilst it is being made. Afterwards add the juice of half a lemon. Sip from time to time.

3. *Port Wine Jelly.*

1 pint port wine,
 $\frac{1}{2}$ oz. isinglass,
 $\frac{1}{2}$ oz. gum arabic,
1 oz. sugar candy.

First dissolve the isinglass in the port wine cold; then boil all the ingredients together ten minutes. Pour it into a mould.

4. *Diet for Diarrhœa, No. 1.*

Take three handfuls of flour: tie in a cloth, as you would a dumpling; boil nine hours. The outer rind must be scraped away, as it becomes discolored when dry. When quite hard and dry, grate as required, and use the flour as you would arrowroot. What is not required will keep in the lump a long time. Keep it in a tin box, and put the box in a dry place.

5. *Diet for Diarrhœa, No. 2.*

Break the yolk of an egg into a basin, and mix slowly with it one wine-glass of brandy.

6. *Diet for Diarrhœa, No. 3.*

Take the whites of one or two eggs. Beat up into a froth. This is best accomplished with a knife, the white of the egg being poured into a plate for that purpose. When completely frothed pour into a wine-glass, and add a few drops of lemon juice or a little loaf sugar. In some cases a patient may be fed exclusively in this way for a time.

If any of our readers can improve on the receipts we have given above, or shall give subsequently, we shall be happy to hear from them.

TWO POPULAR DELUSIONS.

Among the beliefs prevalent with the laity, these two stand prominently forward—that fish is a brain food of great value, and an exceedingly good diet for invalids, and that ice is always pure, no matter how filthy the water from which it was formed. Nor is it at all certain but that the profession has held, at different times, these same sadly erroneous beliefs; indeed, it is feared that some even yet cling to the fish as an article of diet especially created for the sick room. The truth is, that fish as a brain food is worth no more nor as much as many other foods, and as an article of diet for sick rooms, in the majority of cases is absolutely injurious. Relapses have been caused frequently by fish when given after fevers and nervous complaints. Loss of weight followed a fish diet, and very promptly. It should be stricken from the diet card for sick rooms. To convince the average man that ice is or can be filthy is a hard task. But it can be done, and the people should be taught that ice may be as unfit for use as water; and, for the same reason, that freezing does not remove all impurities, nor kill disease germs. It is true that some of the frozen matter is eliminated in congelation, but not all. The fact should be proclaimed, that ice from stagnant pools, or water that contains refuse of any kind, is not fit for use, and that it may breed disease and death.—*H. & H.*

HOT AND COLD FOODS.

Dr. Uffelmann, having studied foods as affected by temperature, says that cold food and drinks lessen body temperature; the lowered temperature is a genuine loss of heat.

The ingestion of cold substances lessens the irritability of the diseased stomach. Cold substances raise the tone of the stomach, increase intestinal peristalsis; they promote the passage of stools, and in dysentery cause an increase of pain. Cold foods and drinks increase the liability to cough. Warm foods raise the temperature slightly and promote perspiration. Hot foods and drinks are more stimulating than cold. When often given, hot foods lessen the tone of the digestive tract. *Wiener Klinik.*